

Please type a plus sign (+) inside this box → ☒

PTO/SB/82 (11-86)

Approved for use through 6/30/99. OMB 0651-0033  
Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

**REVOCATION OF POWER OF  
ATTORNEY OR  
AUTHORIZATION OF AGENT**

Application Number	08/567,564
Filing Date	12/05/95
First Named Inventor	KOLLAR
Group Art Unit	1204
Examiner Name	P Nazario-Gonzalez
Attorney Docket Number	1469-1-001

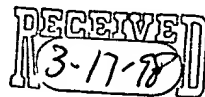
I hereby revoke all previous powers of attorney or authorizations of agent given in the above-identified application:

☐ A Power of Attorney or Authorization of Agent is submitted herewith.

OR

☒ Please change the correspondence address for the above-identified application to:☐ Customer Number

OR


  
Place Customer  
Number Bar Code  
Label here

<input checked="" type="checkbox"/> Firm or Individual Name	John Kollar				
Address	Redox Technologies Inc.				
Address	6 Spencer Court				
City	Wyckoff				
Country	U.S.A.	State	NJ	ZIP	07481
Telephone	201 652-8770	Fax	201 652-8770		

I am the:

☒ Applicant.☐ Assignee of record of the entire interest  
*Certificate under 37 CFR 3.73(b) is enclosed***SIGNATURE of Applicant or Assignee of Record**

Name	John Kollar
Signature	<i>John Kollar</i>
Date	1/17/98

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.